County: Charleston

Facility Type: Residential Treatment for Children & Adolescents

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Mailing/Billing Addres Administrator/Phone

Licensed Unit Licensee

PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LLC RTF-0011 / 08/31/2009 32 2777 SPEISSEGGER DR Charleston / Ltd. Liability CHARLESTON, SC 29405-8229 2777 SPEISSEGGER DR TOLLEY, CHERIE D PH#: 843-747-5830 NORTH CHARLESTON, SC 29405-8299 PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LLC Fac. Cont. Email:LAURA.LOVELL@PSYSOLUTIONS.COM

Totals	For Facility/License T	ype Residential Tr	eatment for Children &	Adolescents	
Number of	Activities/Facilities	licensed: 1	Number Licensed Units	32	
Number of	Activities/Facilities	licensed in county o	E Charleston	# Lics	1
			Number Licensed Units	; 32	

#### Division of Health Licensing

County: Clarendon

Facility Type: Residential Treatment for Children & Adolescents

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Mailing/Billing Addres Administrator/Phone Licensee

Licensed Unit

WILLOWGLEN ACADEMY SOUTH CAROLINA RTF-0023 / 03/31/2010 40 1399 HARMONY CAMP RD Clarendon / Corporation GREELEYVILLE, SC 29056 1399 HARMONY CAMP RD DRAKE RN, MELINDA G PH#: 803-473-4656 GREELEYVILLE, SC 29056 Fac. Cont. Email: MELINDAD@WILLOWLGENSC.COM WILLOWGLEN ACADEMY - SOUTH CAROLINA INC

Totals For Facility/License Type Residential Treatment f	or Children & Adolescents
Number of Activities/Facilities licensed: 1 Number	Licensed Units 40
Number of Activities/Facilities licensed in county of Clarend	on # Lics 1
Number	Licensed Units: 40

2

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## South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Dorchester

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Administrator/Phone Mailing/Billing Addres Licensed Unit Licensee PALMETTO PINES BEHAVIORAL HEALTH RTF-0017 / 01/31/2010 60 225 MIDLAND PKWY Dorchester / Corporation SUMMERVILLE 29485 225 MIDLAND PKWY ZIMMERMAN, BEVERLY MCBEE PH#: 843-747-5830 SUMMERVILLE, SC 29485 Fac. Cont. Email:No Fac Cont. email on record ABS LINCS SC INC

Facility Type: Residential Treatment for Children & Adolescents

Totals For Facility/License Type Residential Tre	atment for Children & Adolescents	
Number of Activities/Facilities licensed: 1	Number Licensed Units 60	
Number of Activities/Facilities licensed in county of	Dorchester # Lics Number Licensed Units : 60	1

### Division of Health Licensing

County: Florence

Facility Type: Residential Treatment for Children & Adolescents

Facility Name
License Nbr/Expiration Date
Location Street
County/Ownership Typ
Location City, State
Mailing/Billing Addres

Administrator/Phone Licensee Licensed Unit

PALMETTO PEE DEE RESIDENTIAL TREATMENT CENTER RTF-0014 / 09/30/2009
601 B GREGG AVE Florence / Ltd. Liability

FLORENCE, SC 29501-4316 601 B GREGG AVE

HAMILTON, PATRICIA PH#: 843-667-0644 FLORENCE, SC 29501-4316

Fac. Cont. Email:DENISE.JOHNSON@PSYSOLUTIONS.COM PALMETTO PEE DEE BEHAVIORAL HEALTH LLC

Totals For Facility/License Type Residential Tre	eatment for Children & Adolescents	
Number of Activities/Facilities licensed: 1	Number Licensed Units 59	
Number of Activities/Facilities licensed in county of	Florence # Lics Number Licensed Units: 59	1

County: Greenville

Facility Type	: Residential	Treatment	for	Children	&	Adolescents
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Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee Licensed Unit
Administrator/Phone	Licensee Licensed Unit
EXCALIBUR YOUTH SERVICES LLC	RTF-0022 / 12/31/2009 42
840 SE MAIN ST	Greenville / Limited Liability
SIMPSONVILLE, SC 29681	PO BOX 968
SHORT, JOHN M PH#: 864-836-7220	TRAVELERS REST, SC 29690
Fac. Cont. Email:No Fac Cont. email on record	EXCALIBUR YOUTH SERVICES LLC
MARSHALL I PICKENS HOSPITAL CHILDREN'S PROGRAM	RTF-0007 / 03/31/2010 22
701 GROVE RD	Greenville / District
GREENVILLE, SC 29605	PLANNING DEPT - ISC 3RD FLOOR, 701 GROVE RD
GRESHAM, STEVE PH#: 864-455-7807	GREENVILLE, SC 29605-5601
Fac. Cont. Email:No Fac Cont. email on record	GREENVILLE HOSPITAL SYSTEM
SPRINGBROOK BEHAVIORAL HEALTHCARE SYSTEM RTF	RTF-0001 / 08/31/2009 68
ONE HAVENWOOD LN	Greenville / Corporation
TRAVELERS REST, SC 29690	PO BOX 1005
JACKSON, KEITH PH#: 864-834-8013	TRAVELERS REST, SC 29690
Fac. Cont. Email:No Fac Cont. email on record	CHESTNUT HILL MENTAL HEALTH CENTER INC

Totals For	Facility/License T	ype Residential Tre	atment for Children &	Adolescents	
Number of Act	ivities/Facilities	licensed: 3	Number Licensed Units	132	
Number of Agt	·ivities/Pagilities	licensed in county of	Creenville	# Lics	

#### South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Horry

Facility Type: Residential Treatment for Children & Adolescents

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Mailing/Billing Addres Administrator/Phone

Licensed Unit Licensee

LIGHTHOUSE CARE CENTER OF CONWAY - RTF RTF-0019 / 01/31/2010 16 152 WACCAMAW MEDICAL PARK DR Horry / Corporation CONWAY, SC 29526-0000 152 WACCAMAW MEDICAL PARK DR SAUVAGEAU, FRANCIS M PH#: 843-347-8871 CONWAY, SC 29526 Fac. Cont. Email:RONALD.CASSIDY@HORIZONHEALTH.COM HHC SOUTH CAROLINA INC

Totals For Facility/License Type Residential Treatment for Children &	Adolescents	
Number of Activities/Facilities licensed: 1 Number Licensed Units	16	
Number of Activities/Facilities licensed in county of Horry  Number Licensed Units	# Lics : 16	1

# South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Lexington

Facility Type	: Residential	Treatment	for	Children	&	Adolescents
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Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
THREE RIVERS BEHAVIORAL HEALTH RESIDENTIAL TREATMENT CENTER	RTF-0015 / 10/31/2009	20
2900 SUNSET BLVD WEST COLUMBIA, SC 29169-3422 BARNETT, JEFF PH#: 803-796-9911 Fac. Cont. Email: JEFF. BARNETT@PSYSOLUTIONS.COM	Lexington / Ltd. Liability 2900 SUNSET BLVD WEST COLUMBIA, SC 29169 THREE RIVERS BEHAVIORAL HEALTH LLC	
THREE RIVERS RESIDENTIAL TREATMENT/ MIDLANDS CAMPUS INC 200 ERMINE RD WEST COLUMBIA, SC 29170 MITCHUM, DARYL G PH#: 803-791-9918	RTF-0018 / 01/31/2010 Lexington / Corporation 200 ERMINE RD WEST COLUMBIA, SC 29170	59
Fac. Cont. Email:DARYL.MITCHUM@PSYSOLUTIONS.COM	THREE RIVERS RESIDENTIAL TREATMENT/ NINC	MIDLANDS CAMPUS

Totals For Facility/License Type	Residential	Treatment f	or Children &	Adolescents
Number of Activities/Facilities lice	ensed: 2	Number	Licensed Units	79

Number	of	Activities/Facilities	licensed in	county of	Lexington		# Lics	2
					Number Licensed	Units :	79	

County: Pickens

Facility Type: Residential Treatment for Children & Adolescents

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Location City, State Administrator/Phone Mailing/Billing Addres

Licensed Unit Licensee

AVALONIA GROUP HOMES INC RTF-0020 / 09/30/2009 55 Pickens / Corporation 404 HAMPTON AVE PICKENS, SC 29671 PO BOX 968 SHORT III, MARVIN J PH#: 864-836-7220 TRAVELERS REST, SC 29690

Fac. Cont. Email: MRVSHO@AOL.COM AVALONIA GROUP HOMES INC

Totals For Facility/License Type Residential Treatment for Children &	Adolescents	
Number of Activities/Facilities licensed: 1 Number Licensed Units	55	
Number of Activities/Facilities licensed in county of Pickens	# Lics	1
Number Licensed Units	: 55	

County: Richland

Facility Type: Residential Treatment for Chil	dren & Adolescents	
Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
DIRECTIONS	RTF-0008 / 03/31/2010	37
1800 COLONIAL DR	Richland / State	
COLUMBIA, SC 29202	1800 COLONIAL DR	
GETZ, PETER M PH#: 803-935-7339	COLUMBIA, SC 29202	
Fac. Cont. Email:No Fac Cont. email on record	SC DEPARTMENT OF MENTAL HEALTH	

Totals For Facility/License Type Residential Trea	atment for Children & Adolescents
Number of Activities/Facilities licensed: 1	Number Licensed Units 37
Number of Activities/Facilities licensed in county of	Richland # Lics 1 Number Licensed Units: 37

County: York

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
NEW HOPE CAROLINAS INC	RTF-0021 / 11/30/2009	150
101 SEDGEWOOD DR	York / Corporation	
ROCK HILL, SC 29732	7515 NORTHSIDE DR STE 200	
PHIFER, SAM PH#: 843-851-5010	NORTH CHARLESTON, SC 29420-4285	
Fac. Cont. Email:RANDYM@NEWHOPETREATMENT.COM	NEW HOPE CAROLINAS INC	
YORK PLACE: EPISCOPAL CHURCH HOME FOR CHILDREN	RTF-0003 / 05/31/2009	40
234 KINGS MOUNTAIN ST	York / Non-Profit Corporation	
YORK, SC 29745-1131	234 KINGS MOUNTAIN ST	
SHIFLET, JOHN C PH#: 803-684-4011	YORK, SC 29745	
Fac. Cont. Email:JSHIFLET@YORKPLACE.ORG	EPISCOPAL DIOCESES OF SOUTH CAROLINA	

Totals For Facility/License Type Residential Treatment for Children & Adolescents Number of Activities/Facilities licensed: 2 Number Licensed Units 190

Number of Activities/Facilities licensed in county of York # Lics Number Licensed Units:

Report Total

Total Number of Activities/Facilities licensed 14